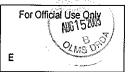
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 64/8	2. Fiscal Year Covered From:
G J f O	and the state of t
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Richard M Sweeney	Name IABSO&R Iron Workers Local Union 399
	Labor Organization File Number 034-927
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 41 Old Republic Lane	Street 409 Crown Point Road
City Marlton	City Westville
State New Jersey ZIP Code + 4 08053	State New Jersey ZIP Code + 4 08093-1359
5. Position in labor organization. Organizer	
Enter appropriate data below if, during the past fiscal year, you or your spo (except as specified in the exclusion). A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organization.	derived income or other economic benefit of ion represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street	
City	
State ZIP Code + 4	
1970	ature
15. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the se	Perjury and other applicable penalties of the law, that all of the information
Signed Richard Sweeney	On 08/08/2005 856-456-9323
	Date Telephone Number

Name of Person Filing Richard Sweeney	File Number U-
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.	
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Iron Workers Local 399 Apprenticeship Fund	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street 409 Crown Point Road	**************************************
City Westville	
State New Jersey ZIP Code + 4 08093-1359	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Training of individuals on work and in job classifications covered by Collective Bargaining Agreements
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street 22.45.15	11.b. Approximate dollar value of such dealing. \$225,000
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Luncheons and dinners at business meetings
	12.b. Amount. \$225
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.